

File with:
Iowa Ethics and Campaign
Disclosure Board
510 E. 12th Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-4073

FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

2008 OCT 20 AM 9:39

COMMITTEE NAME (Must be same as on Statement of Organization)

Ron Rosmann For State Representative

IMPORTANT: Indicate by # type of committee you are reporting for: 1

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC
(11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

Ron Rosmann

Political Party (if applicable)

Democrat

Office Sought

State Representative

District (if Senate or House)

57

FORM
DR-2

(Rev. 07/2007)

DISCLOSURE
REPORT

For Office Use Only

Comm. #

1729

Logged In

5

Scanned

Computer

Audited

9 pages

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

David L. Lusk
SIGNATURE OF PERSON FILING REPORT

712-235-2000
TELEPHONE

10-15-08
DATE SIGNED

I AM FILING A Oct. 20, 2008

(report date)

REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR.

Indicate by # 1

☐ CHECK IF AMENDMENT TO REPORT DATED _____

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in
which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the
committee. This amount MUST be the same as the cash on hand at the end
of the last reporting period or must be zero if this is first report filed.)

\$

6309.35

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (**also see in-kind below)

2575

Schedule F: Loans Received total (Attach Schedule F)

0

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

0

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL

8,884.35

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

1726.46

Schedule F: Loan Repayments total (Attach Schedule F)

0

CASH ON HAND at the end of this reporting period (if final report balance must be zero)

\$

7157.89

**UNPAID BILLS (From Schedule D - Attach Schedule D)

\$

0

**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

\$

0

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

\$

0

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

0

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN
(Including candidate's personal funds)**COMMITTEE NAME** (Must be same as on Statement of Organization)

Ron Rosmann For State Representative

SCHEDULE**A**
(Rev. 07/03)**MONETARY
RECEIPTS**☐ CHECK THIS BOX IF
AMENDING FORM**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.**NOTE:** ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.**CAUTION:** Section 88B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
7/18/08	ID# CK#	Helen Pigg 602 E. 8th Atlantic, Ia 50022	NA	\$ 25 ⁰⁰	<input type="checkbox"/>
7/18/08	ID# CK#	Dana Kunze 56999 Park Rd Lewis, Ia 51544	NA	50 ⁰⁰	<input type="checkbox"/>
7/18/08	ID# CK#	Kevin Kirilin 1101 Prairie View Dr. W. Des Moines, Ia 50266	NA	100 ⁰⁰	<input type="checkbox"/>
7/18/08	ID# CK#	Em Schuck 304 South Helen Sioux City, Ia 51105	NA	20 ⁰⁰	<input type="checkbox"/>
8/10/08	ID# CK#	Nat Halterman 1008 E 3rd Atlantic, Ia 50022		25	<input checked="" type="checkbox"/>
8/10/08	ID# CK#	Lyle Pigg 602 E 8th Atlantic, Ia 50022		20	<input checked="" type="checkbox"/>
8/10/08	ID# CK#	Dan Sontag 58979 Moane Rd Atlantic, Ia 50022		20	<input checked="" type="checkbox"/>
8/10/08	ID# CK#	Gayle Campbell 68353 720th Cumberland, Ia 50843		20	<input checked="" type="checkbox"/>
8/10/08	ID# CK#	Crady Meyer 301 4th St. Lewis, Ia 51544		10	<input checked="" type="checkbox"/>
	ID# CK#	Duane Woodward 107 Main St. Lewis, Ia 51544		10	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 300	
TOTAL (if last page of this schedule)				\$	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 5
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN
(Including candidate's personal funds)**COMMITTEE NAME (Must be same as on Statement of Organization)**

Ron Rosmann For State Representative

SCHEDULE**A**

(Rev. 07/03)

**MONETARY
RECEIPTS**☐ CHECK THIS BOX IF
AMENDING FORM**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.**NOTE:** ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
8/10/08	ID# CK#	Phil Hascall 65504 Galveston Rd Atlantic, Ia 50022		\$ 10	<input checked="" type="checkbox"/>
8/10/08	ID# CK#	Roger Newell 15 West 14th Atlantic, Ia 50022		10	<input checked="" type="checkbox"/>
8/10/08	ID# CK#	Jeff Richter 602 E 5th Atlantic, Ia 50022		10	<input checked="" type="checkbox"/>
8/10/08	ID# CK#	Don Lappe 710 W. 9th Atlantic, Ia 50022		10	<input checked="" type="checkbox"/>
8/10/08	ID# CK#	Larry Harris 59624 Chicago Rd Atlantic, Ia 50022		25	<input checked="" type="checkbox"/>
8/10/08	ID# CK#	Ronald Feilmeyer 1604 E 18th Atlantic, Ia 50022		100	<input checked="" type="checkbox"/>
8/10/08	ID# CK#	Ellen Sokolowski 140 Chestnut St. Atlantic, Ia 50022		40	<input checked="" type="checkbox"/>
8/10/08	ID# CK#	David Dunfee 3208 Chestnut St Atlantic, Ia 50022		50	<input checked="" type="checkbox"/>
8/10/08	ID# CK#	Lisa Heddens 4641 513th Ave Ames, Ia 50014		25	<input checked="" type="checkbox"/>
8/10/08	ID# CK#	Sheary Toelle 103 East 13th Atlantic, Ia 50022		50	<input checked="" type="checkbox"/>

SUB-TOTAL

\$ 330

TOTAL (if last page of this schedule)

\$

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Page 2 of 5
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN
(Including candidate's personal funds)

SCHEDULE

A

(Rev. 07/03)

MONETARY
RECEIPTS☐ CHECK THIS BOX IF
AMENDING FORM**COMMITTEE NAME (Must be same as on Statement of Organization)**

Ron Rosmann For State Representative

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.**NOTE:** ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE (If applicable)	AMOUNT RECEIVED	✓ IF FC FUND RAISE INCON
7/18/08	ID# CK#	Chuck Hasselbrook 250 N. 3rd St Lyons, NE 68038		\$100	<input checked="" type="checkbox"/>
8/5/08	ID# CK#	Joyce Rosenborn 1402 Onyx Dr Harlan, Ia 51537		50	<input checked="" type="checkbox"/>
8/10/08	ID# CK#	Bill Johnson 302 Ironwood Rd Avoca, Ia 51521		50	<input checked="" type="checkbox"/>
8/10/08	ID# CK#	Cornelia Flora 1902 George Allen Ave Ames, Ia 50010		100 ⁰⁰	<input checked="" type="checkbox"/>
8/27/08	ID# CK#	Tom Harkin U.S. Senate Washington, DC		40	<input type="checkbox"/>
8/24/08	ID# CK#	Douglas Landgreen 1301 Baldwin Harlan, Ia 51537		100	<input type="checkbox"/>
8/18/08	ID# 9028 CK#	Cass County Democratic Committee		40	<input type="checkbox"/>
8/19/08	ID# CK#	James Freeland 3107 Palm St Atlantic, Ia 50022		250	<input type="checkbox"/>
9/5/08	ID# CK#	Clark Aehrenholtz 2114 12th Harlan, Ia 51537		50	<input type="checkbox"/>
8/28/08	ID# CK#	Michael Rosmann 1027-1400th St Harlan, Ia 51537	brother	100	<input type="checkbox"/>
SUB-TOTAL				\$880	
TOTAL (If last page of this schedule)				\$	

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Page 3 of 5
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN
(Including candidate's personal funds)**COMMITTEE NAME** (Must be same as on Statement of Organization)

Ron Rosmann For State Representative

SCHEDULE**A**

(Rev. 07/03)

**MONETARY
RECEIPTS**☐ CHECK THIS BOX IF
AMENDING FORM**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.**NOTE:** ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FUNGIBLE RAISE INCOME
8/18/08	ID# CK#	Catherine Booth Box 422 Atlantic, Ia 50022		\$25	<input type="checkbox"/>
8/24/08	ID# CK#	Jeary Peckmann 1200 Westwood Dr Jefferson, Ia 50129		100	<input type="checkbox"/>
8/10/08	ID# CK#	Betty Wells 3134 Kingman Rd Ames Ia 50014		100	<input type="checkbox"/>
9/10/08	ID# CK#	Helen Pigg 602 8th Atlantic, Ia 50022		25	<input type="checkbox"/>
9/16/08	ID# CK#	Lewis Grant 515 W County Rd 72 Wellington, Co 80549		100	<input type="checkbox"/>
9/16/08	ID# CK#	Don Mayes 1432 Elmwood Rd Pawnee, Ia 51562		100	<input type="checkbox"/>
9/23/08	ID# CK#	Paul Mugga 6190 420th Sytheland, Ia 51098		50	<input type="checkbox"/>
9/23/08	ID# CK#	Karen Thompson 66757 680th Cumberland Ia 50843		40	<input type="checkbox"/>
9/29/08	ID# CK#	Gene Gaul 300 Pleasant St. Walnut, Ia 51577		50	<input type="checkbox"/>
9/17/08	ID# 9157 CK#	Pottawattamie County Democratic Rural Comm		100	<input type="checkbox"/>
SUB-TOTAL				690	<input type="checkbox"/>
TOTAL (if last page of this schedule)				\$	<input type="checkbox"/>

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(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN
(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
Ron Rosmann For State Representative

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FC FUND RAISE INCOM
9/27/08	ID# CK#	Kevin Shilling 2123 - 265th Greenfield, Ia 50649		\$ 100	<input type="checkbox"/>
10/9/08	ID# 9028 CK#	Cass County Democratic Comm		150	<input type="checkbox"/>
9/21/08	ID# CK#	Kathleen McAnigen Tufts University Medford, Mass.		50	<input type="checkbox"/>
9/7/08	ID# CK#	Mary Petersen 959 Oak Rd Harlan Ia 51537		50	<input type="checkbox"/>
8/21/08	ID# CK#	Susan Roberts 8830 NW 35th Ankeny, Ia 50022		25	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

375

TOTAL (if last page of this schedule)

2575

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 Page 5 of 5
 (for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
Ron Rosmann For State Representative

DATE EXPENDED (MM/DD/YY)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
7/18/08	ID# CK#	Campbell Welding 113 E Ellsworth Avoca, Ia 51521	signs	\$ 223 ¹⁰
7/30/08	ID# CK#	Harlan Newspapers 1114 7th Harlan, Ia 51537	copies	62 ²⁷
7/30/08	ID# CK#	US Post Office 1209 7th Harlan, Ia 51537	stamps	210 ⁰⁰
8/3/08	ID# CK#	Atlantic News Telegraph 410 Walnut Atlantic, Ia 50022	Advertising	198 ⁸⁰
8/5/08	ID# CK#	KJAN N. Olive St Atlantic, Ia 50022	advertising	80
8/8/08	ID# CK#	Oaks Variety 512 Market Harlan, Ia 51537	parade candy	24 ³⁵
8/10/08	ID# CK#	Hy Vee 2003 Chatsworth Harlan, Ia 51537	fund raiser supplies	48 ⁴⁸
8/8/08	ID# CK#	City of Atlantic City Hall Atlantic, Ia 50022	Rent for fund raiser	35 ⁰⁰
SUB-TOTAL				\$ 882
TOTAL (If last page of this schedule)				\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(f).)

Page 1 of 2 ³

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Ron Rosmann For State Representative

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
8/28/08	ID# CK#	Iowa Democratic Party	VAN Fees	\$ 500 ⁰⁰
9/11/08	ID# CK#	Harlan Newspaper 1114 7th Harlan Ia 51537	copies	58 ⁸⁵
9/10/08	ID# CK#	US Post Office 1209 7th Harlan Ia 51537	stamps	246 ⁹⁶
9/17/08	ID# CK#	Pottawattamie County Treasurer	Plat book	21 ⁸⁵
9/17/08	ID# CK#	Auburn Quad P.O. Box 390728 Cambridge MA 02139	Fees on checks	1.98
9/21/08	ID# CK#	Auburn Quad P.O. Box 390728 Cambridge, MA 02139	Fees on checks	1.98
8/19/08	ID# CK#	Auburn Quad P.O. Box 390728 Cambridge, MA 02139	Fees on checks	3.95
8/10/08	ID# CK#	Auburn Quad P.O. Box 390728 Cambridge, MA 02139	Fees on checks	3.95

SUB-TOTAL \$ 839.52

TOTAL (If last page of this schedule)

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Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page 2 of 3

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
8/21/08	ID# CK#	Auburn Quad P.O. Box 390728 Cambridge, MA 02139	Fees on checks	\$ 4.94
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 4.94
TOTAL (If last page of this schedule)				\$ 1726.46

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(f).)

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(for Schedule B)